## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where

indicated unless correct maintenance fee notifier	ed below or directed of	herwise in Block 1, by (	a) specifying a new corres	spondence address; and	Vor (b) indicating a sep	acute "FEE ADDRESS" fo	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
26584		5/2016		Cartific	uto of Moiling or Trup	emicsion	
OTIS ELEVATOR COMPANY INTELLECTUAL PROPERTY DEPARTMENT 10 FARM SPRINGS				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
FARMINGTON	t, C1 06032					(Дерозню'я имое)	
						(Signature)	
						(Due)	
APPLICATION NO.	FRING DATE	innimitation in	FIRST NAMED INVENTOR	AT	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/684,171 10/10/2003			Richard J. Erieson OT-4416A 2595				
TITLE OF INVENTION	: TRACTION ENHAN	CED CONTROLLED PR	essure flexible fla	T TENSION MEMBER	CTERMINATION DEV	TCE.	
APPLN: TYPE	SMALL ENTITY	ISSUE PEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NQ	\$1510	\$300	\$0	\$1810	02/15/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS	CLASS-SUBCLASS			
LANGDON, EVAN H		3654	187-411000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attorney.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1			
DUEARR NOTE: Und	ess an assignce is ident h in 37 CFR 3.11. Comp SNER	Hed below on esciones	THE PATENT (print or type data will appear on the part a substitute for filing and (B) RESIDENCE: (CITY Farmington, CT	atent. If an assignee is assignment.		locument has been filed for	
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual XI Corpor	ation or other private gre	oup entity Government	
4a. The following fee(s) are submitted:    State Fee   Publication Fee (No small entity discount permitted)   Advance Order - # of Copies			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1462 (enclose an extra copy of this form).				
	tus (from status indicates s SMALL ENTITY stati		Th. Applicant is no long	ger claiming SMALL E	NTITY status. See 37 C	FR 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the r	I Publication Fee (if requeends of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than the Office.	ic applicant; a registere	d autorney or agent; or th	he assignee or other party in	
Authorized Signature				Date	1-17-10		
Typed or printed name David J. Gaskey					37,139		
This collection of informs an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C islity is governed by 35 I application form to the one for reducing this but regime 22313-1450. DC 13-1450.	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (	on is required to obtain or vi 1.14. This collection is esti- depending upon the indiv- e Chief Information Office COMPLETED FORMS TO	tain a benefit by the primated to take 12 minuridual case. Any comme r, U.S. Patent and Trad ) THIS ADURESS. SE	which is to file (and les to complete, including ints on the amount of the emark Office, U.S. Dept ND TO: Commissioner	of by the USPTO to process)  ing gathering, preparing, and  me you require to complete  arument of Commerce, P.O.  for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.